

**Special Education – Early Intervention Specialist**  
**Endorsement Guidelines**  
**To Accompany Rule 24**  
**(Adopted by the State Board**  
**of Education on \_\_\_\_/\_\_\_\_/20\_\_\_\_)**

**006.60 Special Education – Early Intervention Specialist**

006.60A Grade Levels: Birth to Kindergarten

006.60B Endorsement Type: Supplemental

006.60C Persons with this endorsement may teach, consult, or provide services for infants, toddlers, and preschool children, ages birth to kindergarten with verified disabilities, and support families and other personnel with responsibilities for their care and education.

006.60D Certification Endorsement Requirements: The endorsement shall require a minimum of 21 semester hours, which shall include a minimum of 15 semester hours in early childhood special education and a minimum of six (6) semester hours in typical early childhood development, and

006.60D1 A minimum of 240 clock hours of field experiences. Field experiences shall be conducted in pre-school settings which include home-based and center-based programs serving children who have verified disabilities, with their families, and other personnel responsible for their care and education. Of the 240 clock hours, a minimum of 80 clock hours must focus on children ages birth through two years of age and a minimum of 80 clock hours must focus on pre-school aged children, ages 3 to Kindergarten.

006.60D2 Additional Requirements: An applicant for this endorsement must have, or earn concurrently, the Special Education endorsement at the K-6 or K-12 level.

006.60E Endorsement Program Requirements: Nebraska teacher education institutions offering this endorsement program must have on file, within the institution, a plan which identifies the courses and the course completion requirements which the institution utilizes to grant credit toward completion of this endorsement.

**THE FOLLOWING ARE RECOMMENDED GUIDELINES**

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**FOR INCLUSION AS PART OF THE INSTITUTION'S PLAN**  
**UNDER THIS ENDORSEMENT.**

Through the courses identified in its plan, the institution must provide Special Education – Early Intervention Specialist candidates with opportunities to demonstrate the dispositions and competencies required by the following guidelines, based on The Council for Exceptional Children (CEC), Initial Preparation Standards for Special Education Teachers (2012) and CEC Special Education Early Childhood Specialty Set (Draft, 2013).

**Standard 1. Promoting Child Development and Learning** (Ref: NAEYC Standard 1)

Early Intervention Specialists have a child development knowledge base and use their understanding of young children's characteristics and needs, and of multiple interacting influences on children's development and learning, to create environments that are healthy, respectful, supportive, and challenging for each child.

Element 1.1 Know and understand young children's characteristics and needs, from birth to kindergarten.

Element 1.2 Know and understand the multiple influences on early development and learning.

Element 1.3 Use developmental knowledge to create healthy, respectful, supportive, and challenging learning environments for young children.

**Standard 2. Learner Development and Individual Learning Differences**

Early Intervention Specialists understand how disabilities may interact with development and learning and use this knowledge to provide meaningful and challenging learning experiences for infants, toddlers, and preschool-age children with disabilities.

Element 2.1 Early Intervention Specialists understand how language, culture, and family background influence the learning of young children with disabilities.

Element 2.2 Early Intervention Specialists use understanding of development from birth to kindergarten and individual differences to respond to the need of young children with disabilities.

Indicators include, but are not limited to: (All Common Core Indicators are assumed.)

(ECSE1 K1) Theories of typical and atypical early childhood development.

(ECSE1 K2) Biological and environmental factors that affect pre-, peri-, and postnatal development and learning.

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- (ECSE1 K3) Specific disabilities, including the etiology, characteristics, and classification of common disabilities in infants and young children, and specific implications for development and learning in the first years of life.
- (ECSE1 K4) Impact of medical conditions and related care on development and learning.
- (ECSE1 K5) Impact of medical conditions on family concerns, resources, and priorities.
- (ECSE1 K6) Factors that affect the mental health and social-emotional development of infants and young children.
- (ECSE1 K7) Infants and young children develop and learn at varying rates.
- (ECSE1 K8) Impact of child's abilities, needs, and characteristics on development and learning.
- (ECSE1 K9) Impact of social and physical environments on development and learning.
- (ECSE1 K10) Impact of language delays on cognitive, social-emotional, adaptive, play, temperament and motor development.
- (ECSE1 K11) Impact of language delays on behavior.

**Standard 3. Learning Environments**

Early Intervention Specialists create safe, inclusive, culturally responsive learning environments so that infants, toddlers, and preschool-age children with disabilities become active and effective learners and develop emotional well-being, positive social interactions, and self-determination.

- Element 3.1 Early Intervention Specialists, through collaboration with family, care providers, early childhood educators, and other colleagues, create safe, inclusive, culturally responsive environments to engage young children with disabilities in meaningful learning activities and social interactions.
- Element 3.2 Early Intervention Specialists use developmentally-appropriate and instructional interventions to teach young children with disabilities how to adapt to different environments.
- Element 3.3 Early Intervention Specialists know how to intervene safely and appropriately with young children with disabilities in crisis.

Indicators include, but are not limited to:

- (ECSE2 S1) Select, develop, and evaluate developmentally and functionally appropriate materials, equipment, and environments.
- (ECSE2 S2) Organize space, time, materials, peers, and adults to maximize progress in natural and structured environments.
- (ECSE2 S3) Embed learning opportunities in everyday routines, relationships, activities, and places.

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- (ECSE2 S4) Structure social environments, using peer models and proximity, and responsive adults, to promote interactions among peers, parents, and caregivers.
- (ECSE2 S5) Provide a stimulus-rich indoor and outdoor environment that employs materials, media, and adaptive and assistive technology, responsive to individual differences.
- (ECSE2 S6) Implement basic health, nutrition and safety management procedures for infants and young children.
- (ECSE2 S7) Use evaluation procedures and recommend referral with ongoing follow-up to community health and social services.

**Standard 4. Curricular Content Knowledge**

Early Intervention Specialists use knowledge of general and specialized curricula to individualize learning for infants, toddlers, and preschool-age children with disabilities.

- Element 4.1 Early Intervention Specialists understand the key developmental milestones across all developmental domains, daily routines, and needs of young children, and tools of inquiry to plan for developmental and functional outcomes for young children.
- Element 4.2 Early Intervention Specialists can organize their knowledge of child development and disabilities, integrate with cross-disciplinary input, and develop meaningful learning progressions for young children with disabilities.
- Element 4.3 Early Intervention Specialists understand and use general and specialized knowledge of typical and atypical development for teaching across settings and developmental domains, and to individualize learning for young children with disabilities.
- Element 4.4 Early Intervention Specialists modify curricula for infants, toddlers, and preschool-age children to make them accessible and appropriate to young children with disabilities.

*(No additional Indicators other than Common Core Indicators.)*

**Standard 5. Assessment**

Early Intervention Specialists use multiple methods of assessment and data-sources in making educational decisions.

- Element 5.1 Early Intervention Specialists select and use technically sound formal and informal assessments that minimize bias.
- Element 5.2 Early Intervention Specialists use knowledge of measurement principles and practices related to assessment of infants, toddlers, and preschool-age children to interpret assessment results and guide educational decisions for young children with disabilities.

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Element 5.3 Early Intervention Specialists, in collaboration with colleagues and families, use multiple types of assessment information in making programming decisions about young children with disabilities.

Element 5.4 Early Intervention Specialists engage young children with disabilities and family members and/or care providers in quality assessments and provide ongoing feedback to guide them in making decisions regarding their interactions with young children with disabilities.

Indicators include, but are not limited to:

(ECSE4 K1) Role of the family in the assessment process.

(ECSE4 K2) Legal requirements that distinguish among at-risk, developmental delay and disability.

(ECSE4 K3) Alignment of assessment with curriculum, content standards, and local, state, and federal regulations.

(ECSE4 S1) Assist families in identifying their concerns, resources, and priorities.

(ECSE4 S2) Integrate family priorities and concerns in the assessment process.

(ECSE4 S3) Assess progress in the five developmental domains, play, and temperament.

(ECSE4 S4) Select and administer assessment instruments in compliance with established criteria.

(ECSE4 S5) Use informal and formal assessment to make decisions about infants and young children's development and learning.

(ECSE4 S6) Gather information from multiple sources and environments.

(ECSE4 S7) Use a variety of materials and contexts to maintain the interest of infants and young children in the assessment process.

(ECSE4 S8) Participate as a team member to integrate assessment results in the development and implementation of individualized plans.

(ECSE4 S9) Emphasize child's strengths and needs in assessment reports.

(ECSE4 S10) Produce reports that address development across domains and any functional concerns identified in routine natural learning environments.

(ECSE4 S11) Conduct ongoing formative child, family, and setting assessments to monitor instructional effectiveness.

**Standard 6. Instructional Planning and Strategies**

Early Intervention Specialists select, adapt, and use a repertoire of evidence-based instructional strategies to advance learning of infants, toddlers, and preschool-age children with disabilities.

Element 6.1 Early Intervention Specialists consider a child's and family's abilities, interests, learning environments, and cultural and linguistic

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factors in the selection, development, and adaptation of learning experiences for young children with disabilities.

Element 6.2 Early Intervention Specialists use technologies to support instructional assessment, planning, and delivery for young children with disabilities.

Element 6.3 Early Intervention Specialists are familiar with augmentative and alternative communication systems and a variety of assistive technologies to support the movement, access, socialization, communication, and learning of young children with disabilities.

Element 6.4 Early Intervention Specialists use evidence-based strategies to enhance feeding, movement, cognition, language, literacy, social and play development, and skills for optimizing independence of young children with disabilities.

Element 6.5 Early Intervention Specialists develop and implement a variety of transition plans for young children with disabilities across a wide range of settings and different learning experiences in collaboration with families, service coordinators, care providers, teachers, and members of IFSP/IEP teams.

Element 6.6 Early Intervention Specialists teach to mastery and promote generalization of learning for functional participation in everyday routines and activities at home, community and preschool classrooms.

Element 6.7 Early Intervention Specialists promote acquisition of knowledge and skills for critical thinking and problem solving for young children with disabilities.

Indicators include, but are not limited to:

(ECSE5 K1) Concept of universal design for learning.

(ECSE5 K2) Theories and research that form the basis of developmental and academic curricula and instructional strategies for infants and young children.

(ECSE5 K3) Developmental and academic content.

(ECSE5 K4) Connection of curriculum to assessment and progress monitoring activities.

(ECSE5 S1) Plan, implement, and evaluate developmentally appropriate curricula, instruction, and adaptations based on knowledge of individual children, the family, and the community.

(ECSE5 S2) Facilitate child-initiated development and learning.

(ECSE5 S3) Use teacher-scaffolded and initiated instruction to complement child-initiated learning.

(ECSE5 S4) Link development, learning experiences, and instruction to promote educational transitions.

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- (ECSE5 S5) Use individual and group guidance and problem-solving techniques to develop supportive relationships with and among children.
- (ECSE5 S6) Use strategies to teach social skills and conflict resolution.
- (ECSE5 S7) Use a continuum of intervention strategies to support access of young children in the general curriculum and daily routines.
- (ECSE5 S8) Implement and evaluate preventative and reductive strategies to address challenging behaviors.
- (ECSE5 S9) Develop, implement, and evaluate individualized plans with family members and other professionals, as a member of a team.
- (ECSE5 S10) Plan and implement developmentally and individually appropriate curriculum.
- (ECSE5 S11) Design intervention strategies incorporating information from multiple disciplines.
- (ECSE5 S12) Implement developmentally and functionally appropriate activities, using a variety of formats, based on systematic instruction.
- (ECSE5 S13) Align individualized goals with developmental and academic content.
- (ECSE5 S14) Develop individualized plans that support development and learning as well as caregiver responsiveness.
- (ECSE5 S15) Develop an individualized plan that supports the child's independent functioning in the child's natural environments.
- (ECSE5 S16) Make adaptations for the unique developmental and learning needs of children, including those from diverse backgrounds.
- (ECSE7 S8) Know appropriate ways to assist the family in planning for transition between providers and settings that assures continuity of intervention strategies and outcomes.

**Standard 7. Professional Learning and Ethical Practice**

Early Intervention Specialists use foundational knowledge of the field and their professional Code of Ethics and Recommended Practices to inform special education practice, to engage in lifelong learning, and to advance the profession.

- Element 7.1 Early Intervention Specialists understand how foundational knowledge of developmental and learning theories, research, laws, and current issues influence professional practice.
- Element 7.2 Early Intervention Specialists understand that diversity is a part of families, cultures, and schools, and that complex human issues can interact with the delivery of special education services.
- Element 7.3 Early Intervention Specialists understand the significance of lifelong learning and participate in professional activities and learning communities.



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Element 7.4 Early Intervention Specialists advance the profession by engaging in activities such as advocacy and mentoring of colleagues and trainees.

Element 7.5 Early Intervention Specialists provide guidance and direction to child care providers, paraeducators, and volunteers.

Indicators include, but are not limited to:

(ECSE6 K1) Legal, ethical, and policy issues related to educational, developmental, and medical services for infants and young children, and their families.

(ECSE6 K2) Advocacy for professional status and working conditions for those who serve infants and young children, and their families.

(ECSE6 S1) Recognize signs of emotional distress, neglect, and abuse, and follow reporting procedures.

(ECSE6 S2) Integrate family systems theories and principles into professional practice.

(ECSE6 S3) Respect family choices and goals.

(ECSE6 S4) Apply models of team process in early childhood.

(ECSE6 S5) Participate in activities of professional organizations relevant to early childhood special education and early intervention.

(ECSE6 S6) Apply evidence-based and recommended practices for infants and young children including those from diverse backgrounds.

(ECSE6 S7) Advocate on behalf of infants and young children and their families.

**Standard 8. Collaboration**

Early Intervention Specialists collaborate with families, care providers, other educators, related service providers, and personnel from community agencies in culturally responsive ways to address the needs of individuals with disabilities across a range of natural learning experiences.

Element 8.1 Early Intervention Specialists use the theory and principles of effective consultation and collaboration.

Element 8.2 Early Intervention Specialists serve as a collaborative resource to colleagues.

Element 8.3 Early Intervention Specialists use consultation and collaboration to promote the well-being of young children with disabilities across a wide range of settings and collaborators.

Indicators include, but are not limited to:

(ECSE7 K1) Structures supporting interagency collaboration, including interagency agreements, referral, and consultation.

(ECSE7 S1) Collaborate with caregivers, professionals, and agencies to support children's development and learning.



**REDLINE VERSION**

**NEW ENDORSEMENT**

DRAFT #2 – 5.8.13 (Includes new CEC Standards, 2012 and Indicators, 2013 Draft)

DRAFT #3 – 8.2.13

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- (ECSE7 S2) Support families' choices and priorities in the development of goals and intervention strategies.
- (ECSE7 S3) Implement family-oriented services based on the family's identified resources, priorities, and concerns.
- (ECSE7 S4) Provide consultation in settings serving infants and young children.
- (ECSE7 S5) Involve families in evaluation of services.
- (ECSE7 S6) Participate as a team member to identify and enhance team roles, communication, and problem-solving.
- (ECSE7 S7) Employ adult learning principles in consulting and training family members and service providers.
- (ECSE7 S9) Implement processes and strategies that support transitions among settings for infants and young children.

**Early Intervention Specialist Work Group**

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**Notes:**

This supplemental endorsement was first discussed during the Special Education Meeting held to discuss/organize work groups for all of the Special Education supplemental endorsements. Because the Early Childhood endorsements were also being reviewed at that time, it was decided to put this on “hold” to see what the EC endorsements would be.

When the Early Childhood Inclusive, Early Childhood supplemental, and Early Childhood Special Education endorsements were introduced, it was discovered ECI and ECSE would be the only endorsements available for birth-age 3. Few institutions offer ECI (formerly ECEU) and ECSE is graduate-level only, which caused much anxiety in that it is already difficult to find appropriately endorsed early childhood teachers for birth-age 5 children, and especially birth-age 3. Districts are required to offer services for children with disabilities (birth to K) because Nebraska is a birth mandate state. The Preschool Disabilities endorsement will also be eliminated. This proposed

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supplemental endorsement was then developed by the Work Group, and is supplemental to the Special Education endorsement at the undergraduate level.

The endorsement includes CEC Standards (2012) and Early Childhood Special Education Indicators (2013 Draft) plus NAEYC Standard 1 in the proposed guidelines, and will meet Rule 51 and Rule 11 reimbursement requirements.